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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | | Docket Number (Optional) 02796/0202443-US0 |
| Application Number For THERMAL INSULATION FOAMED SHEET, THERMAL INSULATION FOAMED CONTAINER AND METHOD FOR PRODUCING THE SAME | | Filed | January 27, 2005 |
| Art Unit For | 1771 | Examiner | V. S. Chang |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | Fee \$120 | Small Entity Fee \$60 | \$ _____ |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | Fee \$450 | Small Entity Fee \$225 | \$ 460.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | Fee \$1020 | Small Entity Fee \$510 | \$ _____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | Fee \$1590 | Small Entity Fee \$795 | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | Fee \$2160 | Small Entity Fee \$1080 | \$ _____ |
| <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-0100</u>.</p> | | | |
| <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee or record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>52,949</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34</p> | | | |
| <u><i>Dianna Goldenson</i></u> Signature | | <u><i>10/10/2007</i></u> Date | |
| <u>Dianna Goldenson</u> Typed or printed name | | (212) 527-7779 Telephone Number | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

(212) 527-7779
Telephone Number